

L21000407059

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(Address)

(Address)

(City/State/Zip/Phone #)

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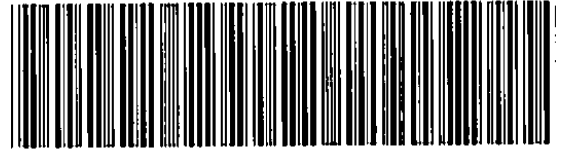


Certificates of Status



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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 92 N Roscoe LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rodney N Clardy
Name of Person

Firm/Company

1360 Pegrove Rd, Saint Johns FL 32259
Address

City/State and Zip Code
seapineslandscaping@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATE CLARON at (904) 521 2796
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION
OF
92 N ROSCOE LLC

FILED
2021 SEP 15 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I – NAME

The name of the limited liability company is 92 N Roscoe LLC, ("company").

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1360 Degrove Rd
Saint Johns, Florida 32259

Mailing Address:

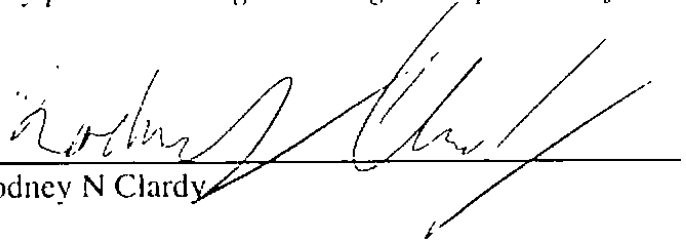
1360 Degrove Rd
Saint Johns, Florida 32259

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Rodney N Clardy
1360 Degrove Rd
Saint Johns, Florida 32259

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.


Rodney N Clardy

ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"MGR" = Manager

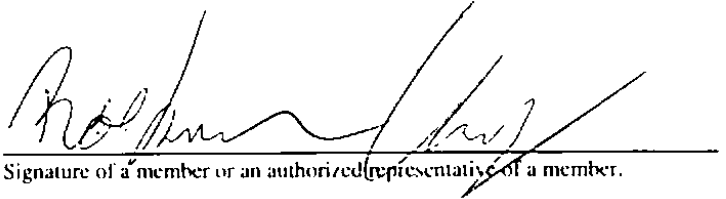
"AMBR" = Authorized Member

MGR

Name and Address:

Rodney N Clardy
1360 Degrove Rd
Saint Johns, Florida 32259

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Rodney N Clardy

Typed or printed name of signee

001 SEP 15 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FL